

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000103342

FILED  
Jul 02, 2008  
Secretary of State

**Entity Name:** TIFFANY LIMOUSINE OF S.W. FLORIDA LLC

**Current Principal Place of Business:**

126 SE 12 AVE  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

126 SE 12 AVE  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SOUMASTRE, CAESAR  
126 SE 12 AVE  
CAPE CORAL, FL 33990 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CAESAR SOUMASTRE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: SOUMASTRE, CEASAR  
Address: 126 SE 12 AVE  
City-St-Zip: CAPE CORAL, FL 33990

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: SOUMASTRE, DARINA  
Address: 126 SE 12 AVE  
City-St-Zip: CAPE CORAL, FL 33990

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: SOUMASTRE, MICHELLE  
Address: 126 SE 12 AVE  
City-St-Zip: CAPE CORAL, FL 33990

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: SOUMASTRE, ANGELA  
Address: 126 SE 12 AVE  
City-St-Zip: CAPE CORAL, FL 33990

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DORINA SOUMASTRE

MGR

07/02/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date